APPLICATION FOR ABSENTEE BALLOT FOR FLATHEAD COUNTY MONTANA

An elector may submit this application for an absentee ballot to the county election administrator during a period beginning 75 days before election day and ending at noon on the day before the election. Voters may apply for each election separately or may request ballots for each subsequent election in which they are eligible to vote, or only for each subsequent federal election.

An elector may request this application by mail, phone, or in person, and may mail the application directly to the **Election Administrator, 800 S. Main, Kalispell, MT 59901** or deliver it in person to the election administrator. A third party may also collect this application and forward it directly to the county election administrator.

I,_____ (**print your name legibly**), the undersigned, with a birth date of _____, being a duly qualified elector of Flathead County, whose residence address in said county is _____, do hereby make application for an official absentee ballot for the upcoming [check one] ☐school ☐ Primary ☐ General ☐ Other _____election to be held in said county.
I authorize my official absentee ballot to be mailed to me at this address (please print):

_____

_____

_____

By signing below I understand that I am requesting an official absentee ballot.

_____   _____
Signature of elector   Date signed

PERMANENT ABSENTEE LIST:

Optional: I request an absentee ballot to be mailed to me, for as long as I reside at the address listed above:
☐ for each subsequent election in which I am eligible to vote;
OR
☐ only for each subsequent <u>federal</u> election in which I am eligible to vote.

I understand that in order to remain on the permanent absentee list, I must complete, sign and return a confirmation form that will be mailed to me..
_____

<u>VOTER INFORMATION PAMPHLET REQUEST</u>:
(also at <u>sos.mt.gov</u> when a statewide issue is on ballot)
☐ If applicable for the election, I would like a Voter Information Pamphlet to be sent to me along with my absentee ballot.
_____

<u>TO DESIGNATE SOMEONE TO PICK UP YOUR ABSENTEE BALLOT FOR YOU:</u>

If you do not want your absentee ballot mailed directly to you, but want someone to pick it up for you, please check the box below and complete this section.

☐ I am designating _____(name of individual) to pick up my absentee ballot and deliver it to me.
_____

<u>IF YOU ARE AN INDIVIDUAL RECEIVING AN ABSENTEE BALLOT FOR YOURSELF OR ANOTHER PERSON(S):</u>

☐ ABSENTEE BALLOT RECEIPT: On this_____ day of _____, 20_____, I received the absentee
ballot of_____ (name of requestor of absentee ballot).

Signature of absentee ballot recipient _____

FOR OFFICE USE	PRECINCT _____	BALLOT # _____